

An Australian Government Initiative

# Social determinants of health



The **social determinants of health** are the non-medical factors that influence health outcomes. [World Health Organisation]

See factors on next page.

Research shows that social determinants can be more important than health behaviours or healthcare in influencing health. Approximate distribution of main influences on health outcomes:



### 30-55% Social determinants

See next page for Gippsland data



# **Health behaviours** for example smoking, substance use, diet, physical activity and help seeking behaviours.

### 20% Healthcare

10%

30%



#### **Physical environment**

for example housing, public facilities and spaces, infrastructure such as transport and the natural environment

Social determinants are largely responsible for inequalities in health outcomes across populations. In a comparison of median age of death in Australian suburbs, a 44 year difference was noted between the highest and lowest areas and a strong influence of socio-economic disadvantage was clearly evident.

# Definitions

Social gradient of health - a pattern where people in lower socio-economic groups are at greater risk of poor health, have higher rates of illness, disability and death, and live shorter lives than people from higher socio-economic groups

Health inequalities - differences in health status among groups of individuals

**Health inequity** - health inequalities that are unfair or unjust and modifiable

Health equity - the absence of unfair systems and policies that cause health inequalities

Intersectionality - how sources of discrimination overlap and reinforce each other

Intergenerational disadvantage where successive generations of people experience persistent disadvantage such as poverty

### **Community perspective**

#### **People with poorer health** outcomes include:



People experiencing most disadvantage



**People in regional** and remote areas



Aboriginal and/or Torres Strait Islander people



People with a disability



LGBTIQA+ people



**People from a multicultural** background



People with mental health and/ or alcohol and other drug issues

Factors that lead to delays in seeking healthcare or avoiding treatment altogether include:

- Cost for the service
- Long wait times
- Lack of transport
- Discomfort sharing personal information for fear of judgement
- A lack of information about available options for care
- Desired care option unavailable
- **Digital barriers**
- Lack of coordination of care between providers
- Time pressures may prevent a discussion about prevention and holistic care
- Pressures related to caring and family responsibilities and seeking financial security and safety are prioritised over health care.

## **Professional perspectives**

Barriers identified by health professionals to addressing non-medical factors impacting client health:

- Limited knowledge about social needs
- The cost of accessing specialists often prevents people from accessing the care they need
- Discomfort discussing and documenting patient's social needs
- Lack of funding and/or organisational support for holistic care
- · Limited time to address non-medical issues

The COVID-19 pandemic has affected some population groups more than others, leading to worsening health inequities. This includes an increase in psychological distress which may be associated with loneliness and social marginalisation





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### **Gippsland data**

There are many factors that impact health and many of them also impact each other. They can be protective or have a negative impact on health:

#### Income



- 23.3% of people have less than \$650 in weekly household income (Vic 16.4%)
- 52.2% of households have low income (in bottom 40% of income distribution) (Vic 40.9%)

#### Employment, working conditions and job security



- 4.8% unemployment rate in Gippsland; highest in Latrobe (5.9%) and
- East Gippsland (4.8%), (Vic 4%) People are impacted by the transition away
- from fossil fuels and native timber harvesting

#### **Childhood experiences and family relationships**



15.4% of children under 16 years live in low income, welfare dependent families (Vic 9.3%)

#### **Education and literacy**



- 23.0 of 100 people participate in vocational education and training (age-standardised rate), (Vic 15.7)
- 13.7% of people have a Bachelor degree or above (Vic 29.2%)

#### Social support and coping skills



- Social isolation is strongly associated with poor mental and physical health
- Social exclusion is commonly experienced due to gender, sexual orientation, culture, race, disability and long-term health conditions

#### Structural - distribution of power, money and resources

- 52.0% of adults believe multiculturalism makes life better (Vic 63.5%)
- Access, affordability and ability to use digital tools is low across Gippsland compared to Victoria; lowest in East Gippsland and Bass Coast

The social determinants of health are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems. [World Health Organisation]

#### Safety



Family violence rates are high across Gippsland; especially in Latrobe (3,361 family incidents per 100,000 people), East Gippsland (3,162) and Wellington (2,892); compared to Victoria (1,378 family incidents per 100,000 people)

#### Food security



7.9% of adults did not have enough money to buy food in the past year (Vic 5.9%)

#### Physical environment



- 1.5% of people travelled to work by public transport (Vic 12.6%)
- - Climate change, natural disasters and pandemics impact health and wellbeing, especially in areas affected by multiple events

#### Housing



- Access to appropriate, affordable and secure housing provides physical and emotional safety promoting better health outcomes.
- 7,312 people in Gippsland accessed homelessness services in 2021-22

# Access to affordable healthcare of decent quality



7.1% of people accessed a GP after hours (Australia 16.6%)

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People are impacted by increased costs of healthcare

# Socio-Economic Indexes for Areas (SEIFA) can be

used to rank areas according to their relative socioeconomic advantage and disadvantage. Gippsland's most disadvantaged locations include Rawson, Morwell, Moe, Churchill, Loch Sport, Cann River, Orbost, Yarram, Wonthaggi and Heyfield.

We need to focus on key drivers and things to address those, which will hopefully improve everything else. - Workshop participant

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